

CLAIMS ONLY						Application Number <i>10/069853</i>	Filing Date			
						Applicant(s)				
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			—				51			
2			—				52			
3			—				53			
4			—				54			
5			1				55			
6			—				56			
7			—				57			
8			—				58			
9			—				59			
10			—				60			
11			—				61			
12			3				62			
13			2				63			
14			—				64			
15			—				65			
16			—				66			
17			1				67			
18			—				68			
19			—				69			
20			1				70			
21			—				71			
22			4				72			
23			4				73			
24			—				74			
25			—				75			
26			—				76			
27			—				77			
28			—				78			
29			—				79			
30			—				80			
31			—				81			
32			—				82			
33			—				83			
34			—				84			
35			—				85			
36			—				86			
37			—				87			
38			—				88			
39			—				89			
40			—				90			
41			—				91			
42			—				92			
43			—				93			
44			—				94			
45			—				95			
46			—				96			
47			—				97			
48			—				98			
49			—				99			
50			—				100			
Total Indep			5				Total Indep			
Total Depend			16	4			Total Depend			
Total Claims			21				Total Claims			